



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
**DATAMASTER MAINTENANCE REPORT**

HEALTH ALCOHOL PROGRAM

11-8 27

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN

204079

DATE OF INSPECTION

5/27/2009

LOCATION OF INSTRUMENT (STREET AND CITY)

ADAIR COUNTY SHERIFF'S DEPT. KIRKSVILLE, MO

TIME OF INSPECTION

0910

**CHECKLIST:** Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 49 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34 °C

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .098

TEST 2 .098

TEST 3 .099

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS / (0-.04) / (.05-.09) / (.10-.14) / (.15-.19) 4 (Over .19) /

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

OPERATES WITHIN DOH GUIDELINES

LOT# 08340

EXP: 10/15/2009

GUTH LABORATORIES, INC.

VAPOR CONCENTRATION .10 %

**INSPECTING OFFICER**

SIGNATURE

TPR. Adam M. Kinney, 582

PRINT NAME

ADAM M. KINNEY

TYPE II PERMIT NUMBER/EXPIRATION DATE

820062 2/25/2010

TELEPHONE NUMBER

(660) 385-2132



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

## BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204079  
05/27/09

TESTING OFFICER:

KINNEY/ADAM/M

OFFICER I.D.: 581

PERMIT NUMBER: 820062

EXPIRATION DATE: 02/25/10

MISCELLANEOUS DATA:

10 MAINT.

--- SUPERVISOR MODE ---

BLANK TEST	.000	09:13
INTERNAL STANDARD	VERIFIED	09:13
EXTERNAL STANDARD	.098	09:13
BLANK TEST	.000	09:14
EXTERNAL STANDARD	.098	09:14
BLANK TEST	.000	09:15
EXTERNAL STANDARD	.099	09:15
BLANK TEST	.000	09:16

N = 3

SIM. = .1

AVG. = .0965

Operator Signature

*TR. Adam M. Kinney, 581*

Printed on recycled paper with agri-based inks

CMS

Face This Side Down - This Edge In First

## BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204079  
05/27/09  
09:11

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

HEATERS  
SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST:

!"#\$%&'()\*+,-./0123456789:;<=/?@ABCDEFGHI  
JKLMNOPQRSTUVWXYZ[\]^\_`a b c d e f g h i j k l m n o  
p q r s t u v w x y z { | } ~ "

Operator Signature

*TR. Adam M. Kinney, 581*

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CMSU 2208-02

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# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204079  
05/27/09

ARREST TIME: 09:00  
SUBJECT NAME:  
SAMPLE/A/B  
DOB: 05/27/77 SEX: M  
STATE/D.L.: MO/123456789  
ARRESTING OFFICER:  
KINNEY/ADAM/M  
OFFICER I.D.: 581  
TESTING OFFICER:  
KINNEY/ADAM/M  
OFFICER I.D.: 581  
PERMIT NUMBER: 820062  
EXPIRATION DATE: 02/25/10  
MISCELLANEOUS DATA:  
.10 RFI

----- BREATH ANALYSIS -----

RADIO INTERFERENCE

Operator Signature

*ADAM M. KINNEY*, 581

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CMSU 2208-02

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



ADAM KINNEY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

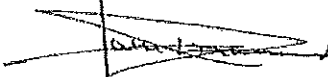
Date 02/25/08

Number 820062

Expires 02/25/2010

MO 580-0771 (7-88)

  
Director of State Public Health Laboratory

  
Director, Department of Health

Lab. 4 (R7-88)